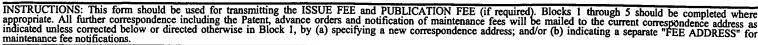
PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE

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indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new maintenance fee notifications. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)					A certificate of a	mailing can	only be used t	or dom	estic mailings of the	
27114 7590 08/30/2006 OFF				Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.						
27114		0		Cert	ificate of N	failing or Tran	emiceia	n		
QUARLES & 411 E. WISCON MILWAUKEE,	V 27 2006 ^計	I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.								
		PATENTI		f	hibin Ren				· (Depositor's name)	
W.			4DEMARK TO	320 3		(Signature)				
				No	ovember 21	. 2006			(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVEN	TOR	TOR ATTORNEY DOCKET NO.				CONFIRMATION NO.	
10/669,474			Douglas McNeel		960296.00333			4831		
TITLE OF INVENTION	I: METHODS AND COM	MPOSITIONS FOR TRE	ATING PROSTATE C	CANCE	er using blood	VACCENE	32 00000019 1	170055	10669474	
			-		01 FC:250 02 FC:150 03 FC:800	34	780.00 DA 300.00 DA 30.00 DA		· ·	
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	UE P	REV. PAID ISSUE	FEE TO	TAL FEE(S) DUE		DATE DUE	
nonprovisional	NO YES	-\$1400 \$70	00 \$300		\$0		\$1700 \$1	000	11/30/2006	
EXAMINER		ART UNIT	CLASS-SUBCLASS							
LIETO, LOUIS D		1632	514-044000	_						
1. Change of corresponde CFR 1.363).	ence address or indication	n of "Fee Address" (37	2. For printing on the	•						
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			(1) the names of up to 3 registered patent attorneys 1 Quarles & Brady, LLP or agents OR, alternatively,							
"Fee Address" indication (or "Fee Address" Indication form			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is 3							
PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2 registered patent attorneys or agents. If no name is listed, no name will be printed.							
3. ASSIGNEE NAME A	ND RESIDENCE DATA	TO BE PRINTED ON	THE PATENT (print or	type)		-				
PLEASE NOTE: Uni	ess an assignee is identi	fied below, no assignee	data will appear on the	e pater	nt. If an assignee	is identific	ed below, the de	ocumen	t has been filed for	
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)										
Wisconsin Alumni Research Foundation Madison, WI (USA)										
Diego chark the commonst				п.						
rease eneck the appropri	ate assignee category or	categories (will not be pr	inted on the patent):	U Inc	dividual XXI Corp	poration or	other private gro	up enti	y Government	
ta. The following fee(s) a Issue Fee	Payment of Fee(s): (P	Please	first reapply any	previously	paid issue fee	shown a	above)			
Publication Fee (N	☐ A check is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached.									
Advance Order - #	The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 17-005 (enclose an extra copy of this form).									
. Change in Entity Stat	us (from status indicated	above)	overpayment, to De	cposit 2	Account Number	11 00)	(enclose ar	extra c	opy of this form).	
	SMALL ENTITY status		☐ b. Applicant is no l	longer	claiming SMALL	ENTITY s	tatus. See 37 CF	R 1.27((g)(2).	
NOTE: The Issue Fee and nterest as shown by the re	Publication Fee (if reque ecords of the United State	ired) will not be accepted es Patent and Trademark	from anyone other tha Office.	n the a	pplicant; a registe	ered attorne	y or agent; or th	e assign	ee or other party in	
Authorized Signature	-327	02e		-	Date Nov	ember	21, 2006			
Typed or printed name Zhibin Ren				Registration No. 47,897						
his collection of informan application. Confidenti	tion is required by 37 CF ality is governed by 35 U	R 1.311. The information U.S.C. 122 and 37 CFR 1	n is required to obtain of .14. This collection is	or retaine	n a benefit by the ted to take 12 mir	public which	ch is to file (and	by the l	JSPTO to process) ing, preparing, and	

submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450. Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.